

EXHIBIT 14

Tennessee Eligibility Determination System (TEDS) Project

Notice Control Documents – Appeal – Resolution

Document Control Information

Document Edit History

Version	Date	Additions/Modifications	Prepared/Revised by
v0.1	05/17/2017	Baseline version	Thomas Barry
v0.2	05/24/2017	Updated in Design Session – Changed name from Appeal Closing Notice to Appeal Resolution Notice	Elizabeth Dubret Hill
v0.3	05/31/2017	Recovery in Progress – Changes from Design Session implemented	Thomas Barry
v0.4	06/09/2017	Ready for PMO Review - Named changed from Appeal – Resolution Notice to Appeal Resolution. New logo and address blocks applied. Example updated. Language approved on 6/20/17. Spanish Translation added 6/29/17.	Elizabeth Dubret Hill
V1.0	07/05/2017	PMO review complete	Lauren Hill
v1.1	08/08/17	Updated per design review comments – corrected the spelling in section 1.3 per design comment WK1-0464; updated references from “Rede” to “Redet” per design review comment WK1-0462 and WK1-0463 WK1-0346 - Added specific notice ID to each Notice Control Document. WK1-0348 - Updated Help Without Appeals Common Language as specified in email to E. Hill on 7/13 in all applicable notices. WK1-0350 - Removed "Document comments... the Notices group" from Notice Template explanation. WK1-0351 - Ensured Person ID appears and is accounted for in each Notice Details table. Clarified that INDV ID = Person ID in the Notice Details Table. WK1-0357 – Unbolded “TennCare Advocacy Program” in Mental Illness Common Language. WK1-0405 – Added “After installing the app” before “create an account by clicking the Create Account button” in the second paragraph of #2 in the Returning Documents Common Language. WK2-#### - Updated "P.O. Box" font from TNR 11 to TNR 12. Updated Trigger Condition for	Thomas Barry

Version	Date	Additions/Modifications	Prepared/Revised by
		<p>Application Already Processed per WK2-0729; Updated returning documents numbering per WK2-0784; updated definition for extended due date per WK2-0785. Updated reference tables per WK2-0725, WK2-0726, WK2-0727, WK2-0728, WK2-0729, WK2-0730. WK2-0782 - Changed "application" to "appeal." WK2-0783 - Renamed "Never Received Redet" to "Renewal Packet Resent- No COB." WK3-0843 - Added the LTSS Services and Support number and removed the Solutions Unit. WK3-0848 - Updated the notice control document. WK3-0892 - Updated conditional text to include appeal type – appeal reason. WK3-0893 - Updated language in notice to call out that LTSS is the unit the appeal will be transferred to for this scenario. WK3-0894 - Updated language in notice to call out that Solutions Unit is the unit the appeal will be transferred to for this scenario. WK3-0895 - Updated language in notice to call out that SSA is the unit the appeal will be referred to for this scenario. WK3-0896 - Changed language to "...a delay in application but the application date is still within 45 days" WK3-0897 - Changed language to "...a delay in application but the application date is still within 90 days" WK3-0898 - Changed language to "change to ..."when facts provided by appellant do not present a valid factual dispute" WK3-0899 - Updated first sentence - change to "We look at issues that have to do with eligibility for our programs."</p>	

Version	Date	Additions/Modifications	Prepared/Revised by
		<p>WK3-0900 - Updated first sentence - change to "We look at issues that have to do with eligibility for our programs."</p> <p>WK3-0901 - changed tense of last sentence to read "If you have questions or do not receive this letter..."</p> <p>WK3-0902 - Updated 1st sentence - change the word "application" to "appeal"</p> <p>WK3-0903 - Updated 1st sentence - change the word "application" to "appeal"</p> <p>WK3-0904 - Updated 1st sentence - remove the words "for TennCare" from both No delay application 45 and No delay application 90</p> <p>WK3-0905 - Updated 2nd sentence - remove the word "Medicaid" and replace with "our program"</p> <p>WK3-0906 - Changed trigger condition title from "no vfd wrong facts" to "no proof of vfd"</p> <p>WK3-0908 - Updated trigger condition to include details "This condition is selected when the appeal has good cause for untimeliness"</p> <p>WK3-1048 – appeals common language confirmed.</p> <p>WK3-0929 - Updated header & footer per design comment. Added header and footer variables to Notice Details Table.</p> <p>WK3-0866 - Recipient address block updated to upper case Times New Roman 10 pt. font per Standards.</p> <p>WK3-0814 - Removed "www." from all notice control documents.</p> <p>WK3-0990 - Updated spacing throughout the design document.</p> <p>WK4-0857 – updated example.</p> <p>WK4-0858 – updated example.</p> <p>WK4-0995 - change applied</p>	

Version	Date	Additions/Modifications	Prepared/Revised by
		WK5-0557 - change addressed WK4-0948 – Notice Details table updated WK3-0923: removed address punctuation and updated name from toggle to all capital case WK5-0024: Change Made	
1.2	8/21/2017	WK3-0926 – Updated common language	Elizabeth Dubret Hill
1.3	8/21/2017	WK5-0024 – Updated per Kim Hagan; added this language back in	Elizabeth Dubret Hill
1.3	8/29/2017	Document formally approved by TennCare on 8/29/2017 with the approval of DEL-26 Functional Design Document	Alison Gallun
1.4	10/03/2017	TEDS-14758: Remove 1- from the SSA phone number in the Appeal Resolution Letter TEDS-14572: Add quotation marks to "How to Send Proof" common language on all notice templates.	Lolly Kruse
1.4	10/06/2017	Document included in Change Request submission for September 2017	Alison Gallun
1.4	10/18/2017	Document approved with the Approval of September 2017 Change Request submission	Alison Gallun
1.5	10/10/2017	TEDS-14828: Updated the rules citation fonts to TNR pt. 9	Lolly Kruse
1.5	10/24/2017	TEDS-15155 & TEDS-15154: Add the "How to Send Information to TennCare" Common Language to the appeal resolution notice, since we added the "Go to the "How to Send Information to TennCare" " language.	Lolly Kruse
1.5	11/3/2017	Document included in Change Request submission for October 2017	Alison Gallun
1.5	11/14/2017	Document approved with the Approval of October 2017 Change Request submission	Sakshi Bhatnagar
1.6	11/13/2017	TEDS-17034: Updated Spanish Translation	Elizabeth Hill
1.6	1/5/2018	Document included in Change Request submission for December 2017	Sakshi Bhatnagar

Version	Date	Additions/Modifications	Prepared/Revised by
1.6	2/21/2018	Document approved with the Approval of December 2017 Change Request submission	Sakshi Bhatnagar
V1.7	6/7/2018	TEDS-30502: Added triggering logic for How to Send Info to TennCare attachment	Lolly Kruse
V1.7	6/7/2018	Document included in Change Request Submission for June 29, 2018	Lolly Kruse
V1.8	6/12/2018	TEDS-30502: Removed the space in P.O. box in both Spanish and English TEDS-28006: Replaced references of Tennessee Health Connection with TennCare Connect, and remove 'the' TEDS - 39455: Added triggering logic for RMB and RMC Member portal functionality.	Ajay Reddy
V1.8	6/12/2018	Document submitted for June 29, 2018 submission	Ajay Reddy
V1.8	7/11/2018	Document approved with the Approval of Change Request submission for June 29th, 2018.	Shea Roberson
V1.9	10/30/2018	TEDS 54263. Language changed for Untimely Appeal	Nikhil Gaitonde
V1.9	11/30/2018	Document included in Change Request Submission for November 30, 2018	Nikhil Gaitonde
V1.9	12/18/2018	Document approved with approval of 11/30/2018 Change Request submission	
V1.10	05/31/2019	TEDS-86165 – update resolution triggers. Remove 'Renewal Packet Resent- No COB' Add the following trigger conditions Scheduled for 4.0.3 release in production	
V1.10	5/31/2019	Document included in Change Request submission for 5/31/2019	
V1.10	6/17/2019	Document approved with approval of 5/31/2019 Change Request submission	

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V1.11	7/9/2019	TEDS-82834 – Wave 5.0 submission of changes made with TEDS-86165 that was released to production with 4.0.3 release.	Lolly Kruse
V1.11	7/11/2019	Document included in Change Request resubmission for 6/21/2019	
V1.11	7/24/2019	Document approved with 6/21/2019 Change Request resubmission	
V1.12	7/29/2019	TEDS-92224: Update documentation to reflect changes made in 5.0	Lolly Kruse
V1.12	8/9/2019	Document included in Change Request submission for 8/9/2019	
V1.12	8/28/2019	Document approved with approval of 8/9/2019 Change Request submission	
V1.13	1/17/2020	TEDS-115038: Update withdrawal trigger, resolved in favour of appellant trigger, and change TCC phone to Appeal Clerk's Office Phone number	Lolly Kruse
V1.13	3/20/2020	Document included in Change Request submission for 3/20/2020	
V1.13	4/27/2020	Document approved with approval of 3/20/2020 ADR Submission	Madeline Fahey
V1.14	7/6/2020	TEDS-130515 – Updated the document in Release 11.0. Updated language in "Trigger Condition: No Proof of VFD to say 'Our Programs' instead of Medicaid in the first paragraph.	Prakrutha Makonda
V1.14	7/27/2020	Document included in 7/27/2020 ADR Submission	Madeline Fahey
V1.14		Document approved with approval of 7/27/2020 ADR Submission	Madeline Fahey
V1.15	9/14/2020	TEDS-119527 - Updated the document in Release 12.0. Remove "the" before "call TennCare connect in the paragraph "If you agree that we resolved your issue, you do not need to do anything else. If you were appealing something else, call	Prakrutha Makonda

Version	Date	Additions/Modifications	Prepared/Revised by
		<TennCare Connect> right away at < Appeal Clerk's Phone>."	
V1.15	9/22/2020	Document included in 9/22/2020 ADR Submission	Madeline Fahey
V1.15	10/28/2020	Document approved in the approval of the 9/22/2020 submission	Laura Lewis
V1.16	2/22/2021	TEDS-155279: Updated notice with appeal language in Release 14.0 Language Updated in the following Trigger Conditions: 1. Withdrawal Form Received 2. No VFD – No Facts 3. No Proof of VFD	Prakrutha Makonda
V1.16	2/26/2021	Document included in the 3/1/2021 ADR Submission	Laura Lewis
V1.16	4/12/2021	Document approved in the approval of 3/1/2021 ADR Submission	Laura Lewis
V1.17	7/1/2021	Release 16.0 TEDS-92659: Remove the existing How to Report Changes sheet so that it can be included as a standard attachment	Austin Kalmans
V1.17	7/7/2021	Document included in the 7/7/2021 ADR Submission	Laura Lewis
V1.18	4/4/2022	Updated the document based on requirements for CR TEDS-189101- Release 20.0 – Version # : TN 600.10- Revision Date : 6/12/2022 – Added Trigger Condition: Resolved by Sending a New Eligibility Notice	Genevieve Collado
V1.18	4/11/2022	Document included in the 4/11/2022 ADR submission	Meghan Donahue
V1.18	5/25/2022	Document approved with the approval of the 4/11/2022 ADR submission	Meghan Donahue

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1 Notice Information

1.1 Notice Summary

Notice ID	TN 600
Notice Name:	Appeal Resolution
Notice Type	Notice
Description	This is a notice sent to an individual to inform him/her that his/her appeal is closing due to the reason stated in the letter. Examples of closure include untimely appeal, duplicate appeal, and internal resolution. Closure notices are only sent if the appeal is resolved without a fair hearing.
Recipient(s)	Appellant and Appeal Authorized Representative(s)
Category of Eligibility:	N/A
Language(s)	English/Spanish
Other forms sent out with this notice	There are no forms sent with the Appeal Resolution.
Attachments sent with this notice	The attachments sent with the Appeal Resolution are How to Report Changes or Send Information to TennCare, Special Help and Foreign Language Assistance.
Notes:	<p>The Appeal Resolution is a parent notice for the attachments sent with it. The hierarchy is as follows. It's location is bolded:</p> <ol style="list-style-type: none">1. Appeal Resolution ← <i>Parent Letter</i>2. How to Report Changes or Send Information to TennCare3. Special Help4. Foreign Language Assistance <p>If an appeal is registered and closed within the same day, the Appeal Resolution letter will be sent.</p>

1.2 Notice Triggering

Manual Trigger?	No
Automatic Trigger?	Yes

Business Trigger	An appeal has been resolved, and a worker changes the status to "Resolved" with any appeal status reason except for Order Implemented.
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1.3 Business Triggers

Category	Component	Field	Condition	Comment
Appeal Resolution	Register Maintain Appeal View Edit Status	SUBMIT	Appeal status is successfully changed to Resolved	Different conditional text will populate based on the appeal status and appeal type-appeal reason on the view/edit screen in the appeals module.
Withdrawal Form Received	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Withdrawal form Received Appeal Status = Resolved	This section will populate when the appeal is closed for voluntary withdrawals.
Incorrect Appeal - LTSS	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Incorrect Appeal - LTSS Appeal Status = Resolved	This section will populate when the appeal is closed since it is being transferred to the LTSS unit.
Incorrect Appeal - Medical	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Incorrect Appeal - Medical Appeal Status = Resolved	This section will populate when the appeal is closed since it is being transferred to the Solutions Unit.
Incorrect Appeal SSA	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Incorrect Appeal SSA Appeal Status = Resolved	This section will populate when the appeal is closed because the individual is appealing their effective start date for SSI. The individual is

Category	Component	Field	Condition	Comment
				referred to SSA for resolution.
Duplicate Appeal	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Duplicate Appeal Status = Resolved	This section will populate when the appeal is closed since it is a duplicate appeal.
Untimely Appeal	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Untimely Appeal OR Appeal Status Reason = Untimely Appeal – Redet Appeal Status = Resolved	This section will populate when the appeal is closed due to untimeliness. This condition is selected only when the appeal has good cause for untimeliness
Untimely Appeal – Redet within 90 days	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Untimely Appeal – Redet Appeal Status = Resolved Letter Date < 90 days from Renewal Date	This section will populate when the appeal is closed due to untimeliness after a redetermination and the individual is still within their 90 day reconsideration. This condition is selected only when the appeal has good cause for untimeliness
Resolved in Favor of Appellant	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Resolved in Favor of Appellant Appeal Status = Resolved	This section will populate when the appeal is closed in favor of the appellant.
Resolved by Sending a New Eligibility Notice	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Sending a new notice Appeal Status = Resolved	This section will populate when the appeal is closed when a new eligibility notice is sent.

Category	Component	Field	Condition	Comment
No Proof of Application	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = No Proof Application Appeal Status = Resolved	This section will populate when the appeal is closed because proof of application was not submitted.
Incorrect Proof of Application	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Incorrect Proof Application Appeal Status = Resolved	This section will populate when the appeal is closed because the proof of application that was submitted was incorrect/invalid.
Processed – Delayed Application	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Processed – Delayed Application	This section will populate when the appeal is closed because the application has been processed.
Application Already Processed	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Application Already Processed – Approved OR Appeal Status Reason = Application Already Processed – Denied	This section will populate when the appeal is closed because a determination has already been made.
No Delay Application – 45	Register_ Maintain Appeal View Edit Status Register_ Maintain Appeal Appeal Details	Appeal Status Reason Appeal Type Category	Appeal Status Reason = No Delay Application Appeal Status = Resolved Appeal Type = Delay Category != LTSS	This section will populate when the appeal is for a delay in application but the application date is still within 45 days.

Category	Component	Field	Condition	Comment
No Delay Application – 90	Register_Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = No Delay Application Appeal Status = Resolved	This section will populate when the appeal is for a delay in application but the application date is still within 90 days.
	Register_Maintain Appeal Appeal Details	Appeal Type Category	Appeal Type = Delay Category = LTSS	
No VFD – No Facts	Register_MaintainAppeal_ViewEditStatus	Appeal Status Reason	Appeal Status Reason =No Valid Factual Dispute Appeal Status = Resolved	This section will populate when an appeal is closed for no facts.
	Legal Review Details	Additional Information received from appellant	Additional Information received from appellant = No or Null	
No Proof of VFD	Register_MaintainAppeal_ViewEditStatus	Appeal Status Reason	Appeal Status Reason =No Valid Factual Dispute Appeal Status = Resolved	This section will populate when facts provided by appellant do not present a valid factual dispute.
	Legal Review Details	Based on additional information received, is this a valid factual dispute?	Based on additional information received, is this a valid factual dispute? = No	
VFD – Res Judicata Closure	Register_Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Hearing Already Held Appeal Status = Resolved	This section will populate because the appellant has already had a hearing.
Non-Fair Hearable	Register_Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Non Fair Hearable Appeal Status = Resolved	This section will populate when the appeal does not have a fair hearable issue.

Category	Component	Field	Condition	Comment
Packet - COB	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Packet - COB Appeal Status = Resolved	This section will populate when a packet is resent and the appellant has COB
Packet - No COB	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Packet - No COB Appeal Status = Resolved	This section will populate when a packet is resent and the appellant doesn't have COB
No Verifications - COB	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = No Verifications - COB Appeal Status = Resolved	This section will populate when a verifications are pending and the appellant has COB
No Verifications - No COB	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = No Verifications - No COB Appeal Status = Resolved	This section will populate when a verifications are pending and the appellant doesn't have COB
Packet Received	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Packet Received Appeal Status = Resolved	This section will populate when a packet has already been received for the appellant
Renewal Info Received	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Renewal Info Received Appeal Status = Resolved	This section will populate when additional verifications have already been received for the appellant
Untimely - No Packet	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = Untimely - No Packet Appeal Status = Resolved	This section will populate when the appellant is appealing outside of the 90 day reconsideration period
No Verification	Register_ Maintain Appeal View Edit Status	Appeal Status Reason	Appeal Status Reason = No Verification	This section will populate when the appellant is

Category	Component	Field	Condition	Comment
			Appeal Status = Resolved	appealing outside of the 90 day reconsideration period

2 Notice Template

Below is a text representation of the form/notice as it will exist in TEDs. Yellow highlights indicate fields that will be derived from the TEDs application. Red highlights indicate manual fields that will be collected from the user at the time of generation. Blue text indicates a triggering condition for the section directly following the blue text.



State of Tennessee

<TennCare>

P.O. Box <TEDS POBox>

<TEDS City>, <TEDS State> <TEDS Zip>



<Inclusion>

<Month> <DD>, <YYYY>

<APPELLANT NAME>

<APPELLANT ADDR 1> <APPELLANTADDR 2>

<APPELLANT CITY> <APPELLANT STATE> <APPELLANT ZIP>

Appeal ID: <Appeal Number>

Dear: <Appellant Name> (Age: <Age> and Person ID: <INDV ID>)

On <Appeal Received Date>, we received your appeal about your <Appeal Reason>.
But, we're closing your appeal.

Why?**<Trigger Condition: Withdrawal Form Received>**

When you appeal, you are asking to tell an Administrative Judge the mistake you think TennCare made. It is called a fair hearing. **You have the right to a fair hearing about your appeal.**

Federal law says that we cannot end your appeal unless you ask us in writing. We received your signed withdrawal form that said you want to end your appeal, so we are closing your appeal. You will **not** get a fair hearing. Your coverage ended on the date we closed this appeal.

<Trigger Condition: Incorrect Appeal – LTSS>

We look at issues that have to do with eligibility for our programs. We looked at your problem and think it's about something else. So, we've sent your issue to Long Term Services and Supports. They'll look at your issue and see if they can help you with your problem. If you have questions, you can call them at <LTSS Phone>.

<Trigger Condition: Incorrect Appeal – Medical>

We look at issues that have to do with eligibility for our programs. We looked at your problem and think it's about medical care. So, we've sent your issue to the TennCare Member Medical Appeals unit. They'll look at your issue and see if they can help you with your problem. If you have questions, you can call them at <Medical Appeals Unit Phone>.

<Trigger Condition: Incorrect Appeal – SSA>

Our records show you get Supplemental Security Income (SSI). People who get SSI in Tennessee also get TennCare Medicaid. But, the Social Security Administration (SSA) decides the start date of your SSI in Tennessee. We can't change this for you.

[42 USC 1383c; Tenn.Comp.R.&Regs.1200-13-13]

What can you do?

Rev: 7/1/2021

1

Need special help? Need to report a change? Have questions? Call us.

<TennCare Connect> <TCC Phone>

We're here to help you <StartDT> through <EndDT>, <StartTime> to <EndTime>

If you don't agree with your start date, you must tell SSA. Call them at **800-772-1213** or go to your local SSA office. To find your local office, go to <https://ssa.gov>.

<Trigger Condition: Duplicate Appeal>

You've already filed an appeal about this problem. We can't open an appeal about the same problem again.

<Trigger Condition: Untimely Appeal or Untimely Appeal – Redet within 90 days>

It's too late to appeal this problem. We sent you a letter that said you had 40 days to appeal. We received your appeal **after** the 40 days ended. [Tenn.Comp.R&Regs: 1200-13-19-.07]

Do you disagree with our decision that you can't get a fair hearing? You can file a petition for review in the Davidson County Chancery Court. **You have 60 days from the date on this letter to file a petition for review.** After that, it's too late. [Tenn. Code Ann. § 4-5-322]

This letter is only for **your** appeal. This is not for anyone else in your family.

<Trigger Condition: Untimely Appeal – Redet within 90 days >

Important: You still have time to send your information to us. You have until **<ExtendedDate>** to send us **your information**. If you send it to us in time, we'll review your facts to decide if you still qualify. If you don't send us your facts by **<ExtendedDate>**, you'll have to complete a new application to get coverage again.

<Trigger Condition: Resolved in Favor of Appellant>

You asked for a hearing because you think we made a mistake about your coverage. We reviewed the facts of your case and agree with you so we have resolved your issue.

If you haven't received a letter from us within the next 10 days, please call **<Appeal Clerk's Phone>**. You can also call us at this phone number if you have questions about your resolution.

<Trigger Condition: Resolved by Sending a New Eligibility Notice>

You asked for a hearing because you think we made a mistake about your coverage. We reviewed the facts of your case. And, we resolved your issue by sending you a new letter about your coverage.

If you haven't received this new letter from us within the next 10 days, please call **<Appeal Clerk's Phone>**. You can also call us at this phone number if you have questions about your resolution.

<Trigger Condition: No Proof of Application>

We reviewed your appeal and sent you a letter asking you to send us proof of the date you applied.

When you appealed, you **didn't** give us proof showing the date you applied. Our letter listed several ways to show this proof.

You didn't give us more proof of the date you applied so you can't get a fair hearing.

<Trigger Condition: Incorrect Proof of Application >

We reviewed your appeal and sent you a letter asking you to send us proof of the date you applied.

When you appealed, you didn't give us proof showing the date you applied. Our letter told you what facts we needed and gave you more time to get those facts to us. You sent us more facts.

But, you did not give us the facts we need to work your appeal. You did not give us facts that show the date you applied.

So, based on the facts you gave us, **you can't get a fair hearing.**

Do you have proof showing the date of your application? Send it to us right away.

Although we have closed **this** appeal, you can still send us your proof. We may still be able to see if you can get TennCare.

Be sure to keep the originals for your records. Send us a copy.

Go to the "How to Send Information to TennCare" page with this letter to find out how to send us your proof.

<Trigger Condition: Processed – Delayed Application >

We have reviewed and processed your application. You will receive another letter with our decision. If you have questions or did not receive the decision letter, please call **<Appeal Clerk's Phone>**.

Did you receive another letter from us that listed the date and time for a hearing? If so, your hearing is also cancelled. Now you will not have a hearing for the **<AppealReason>**.

<Trigger Condition: Application Already Processed >

We have already reviewed and processed your application. You should have received a letter with our decision. If you have questions about our decision or did not receive the decision letter, please call **<Appeal Clerk's Phone>**.

<Trigger Condition: No Delay Application – 45>

You told us that you applied over 45 days ago. We've reviewed your application date and found that it has not been over 45 days since you applied.

We are closing your appeal. But we've sent your application to our eligibility staff. It can take up to 45 days for them to finish. If they need more information, they'll send you a letter that tells you what they need. They'll also send you a letter about their decision.

<Trigger Condition: No Delay Application – 90>

You told us that you applied over 90 days ago. We've reviewed your application date and found that it has not been over 90 days since you applied.

We are closing your appeal. But we've sent your application to our eligibility staff. It can take up to 90 days for them to finish. If they need more information, they'll send you a letter that tells you what they need. They'll also send you a letter about their decision.

<Trigger Condition: No VFD – No Facts>

We sent you a letter asking you to send us more information. We asked you to tell us the mistake TennCare made or how you may qualify for our program.

[Tenn. Comp. R. & Regs. 1200-13-19-.05(3)]

When you appealed, you **didn't** give us the facts we need to work your appeal. Our letter told you what facts we needed and gave you more time to get those facts to us.

You didn't give us more facts so you can't get a fair hearing. **This appeal is now closed.**

Do you disagree with our decision that you can't get a fair hearing? You can file a petition for review in the Davidson County Chancery Court. **You have 60 days from the date on this letter to file a petition for review.** After that, it's too late. [Tenn. Code Ann. § 4-5-322] This letter is only for **your** appeal. This is not for anyone else in your family.

Did you appeal before your coverage ended, and we said you got to keep your coverage during your appeal? If yes, then your coverage ended on the date we closed this appeal.

<Trigger Condition: No Proof of VFD>

We sent you a letter asking you to send us more information. We asked you to tell us the mistake TennCare made or how you may qualify for our programs.

[Tenn. Comp. R. & Regs. 1200-13-19-.05(3)]

When you appealed, you **didn't** give us the facts we need to work your appeal. Our letter told you what facts we needed and gave you more time to get those facts to us. You sent us more facts. But, you still did **not** give us all the facts we need to work your appeal. And, you did **not** tell us a mistake that, if you're right, means that you can have TennCare.

So, based on the facts you gave us, **you still can't get a fair hearing.** **This appeal is now closed.**

Do you disagree with our decision that you can't get a fair hearing? You can file a petition for review in the Davidson County Chancery Court. **You have 60 days from the date on this letter to file a petition for review.** After that, it's too late. [Tenn. Code Ann. § 4-5-322] This letter is only for **your** appeal. This is not for anyone else in your family.

Did you appeal before your coverage ended, and we said you got to keep your coverage during your appeal? If yes, then your coverage ended on the date we closed this appeal.

<Trigger Condition: VFD – Res Judicata Closure>

You have already had a fair hearing about this.

On **<PriorHearingDt>**, you had a hearing about the same issue. You told us you disagreed with a decision we made about your coverage. A judge heard your facts and made a decision.

You have a right to appeal that decision. A copy of the judge's decision, also called an Order, was mailed to you. Appendix A of that order tells you about your rights to appeal it.

You cannot have another hearing to talk about the same facts. Because this is not a new or different issue, **this appeal is now closed.**

If you believe this appeal is about a new or different issue, call us for free at **<Appeal Clerk's Phone>**. **>** and tell us.

<Trigger Condition: Non Fair Hearable>

It's too early to file an appeal or request a fair hearing about this issue.

<Trigger Condition: Renewal - Packet - COB>

Your coverage was ending because you didn't return your Renewal Packet. But you said you didn't get a Renewal Packet.

We resolved your appeal by sending you another Renewal Packet. And we sent it to the address you gave us when you filed your appeal. Because you appealed before your coverage ended, you'll keep your coverage for now.

What if we don't get your Renewal Packet by **<COB end DATE>**? Your coverage will end. And you won't get another letter before your coverage ends.

What if we don't get your Renewal Packet before your coverage ends? You can still send us your Renewal Packet. But we must get it by **<90 day Date>** to decide if you still qualify.

What if we get your Renewal Packet after **<90 day DATE>**? We won't be able to work your Renewal Packet. You'll have to complete a new application to apply again. If you apply again and qualify for health care coverage with us, you will have a break in your coverage.

<Trigger Condition: Renewal - Packet – NO COB>

Your coverage ended because you didn't return your Renewal Packet. But you said you didn't get a Renewal Packet.

We resolved your appeal by sending you another Renewal Packet. And we sent it to the address you gave us when you filed your appeal.

We must get your Renewal Packet by **<90 day DATE>** to decide if you still qualify. If you still qualify, you'll get coverage again. **And, you won't have a break in your coverage.**

What if you return your Renewal Packet after **<90 day DATE >**? We won't be able to work your Renewal Packet. You'll have to complete a new application to apply again. If you apply again and qualify for health care coverage with us, you will have a break in your coverage.

<Trigger Condition: Renewal - No Verifications - COB>

Your coverage was ending because we sent you a letter asking for more facts and you didn't send us what we needed. But you said you didn't get the letter that told you what was needed.

We resolved your appeal by sending you another letter. And we sent it to the address you gave us when you filed your appeal. Because you appealed before your coverage ended, **you'll keep your coverage for now.**

What if we don't get your facts by **<COB end DATE>**? Your coverage will end. And you won't get another letter before your coverage ends.

What if we don't get your facts before your coverage ends? You can still send us your facts. But we must get it by **<90 day Date>** to decide if you still qualify.

What if we get your facts after **<90 day DATE>**? It will be too late for us to use what you send us. You'll have to complete a new application to apply again. If you apply again and qualify for health care coverage with us, you will have a break in your coverage.

<Trigger Condition: Renewal - No Verifications – NO COB >

Your coverage ended because we sent you a letter asking for more facts and you didn't send us what we needed. But you said you didn't get the letter that told you what was needed.

We resolved your appeal by sending you another letter. And we sent it to the address you gave us when you filed your appeal.

We must get your facts by **<90 day DATE>** to decide if you still qualify for coverage with us. If you still qualify, we'll give you your coverage back. **And, you won't have a break in your coverage.**

What if you return your facts after **<90 day DATE >**? It will be too late for us to use what you send us. You'll have to complete a new application to apply again. If you apply again and qualify for health care coverage with us, you will have a break in your coverage.

<Trigger Condition: Renewal – Packet Received>

You asked for a hearing because you think we made a mistake about your health care coverage with us. We reviewed the facts of your case and agree with you.

The mistake you said we made in your appeal was ending your health care coverage because we said you didn't return your Renewal Packet. But you did return your Renewal Packet. We resolved your issue by reviewing your Renewal Packet. You'll receive a decision from us soon.

Because we resolved your problem, we don't think you need a hearing. So your appeal is now closed. If you agree that we resolved your problem, you don't need to do anything else.

Did you get another letter from us that told you the date and time for a hearing? If so, your hearing is cancelled because your problem has been resolved.

<Trigger Condition: Renewal – Renewal Info Received>

We have received your information. We are looking at what you sent us. When we make a decision about your coverage we'll send you a letter telling you our decision.

<Trigger Condition: Renewal – Untimely Appeal>

We sent you a letter that said it was time to renew your health care coverage with us. We looked at your facts and sent you a letter telling you about our decision. You appealed our decision about your health care coverage.

But, it's too late to appeal this problem. We sent you a letter that said your health care coverage was ending or changing. In that letter we said you had 40 days to appeal. We received your appeal **after** the 40 days ended.

[Tenn.Comp.R&Regs: 1200-13-19-.07]

<Trigger Condition: Renewal – Untimely – No Packet>

Important: You still have time to send your information to us. You have until **<90 day due date>** to send us your completed Renewal Packet. If you send it to us in time, we'll review your facts to decide if you still qualify.

< Trigger Condition: Renewal – Untimely – No Verification>

Important: You still have time to send your information to us. You have until **<90 day due date>** to send us your facts. If you send it to us in time, we'll review your facts to decide if you still qualify.

<Trigger Condition: Always>

Since **we are closing your appeal**, you don't need a hearing for this problem anymore.

If you agree that we resolved your issue, you do not need to do anything else. If you were appealing something else, call **<Eligibility Appeals Unit>** right away at **< Appeal Clerk's Phone>**.

What if you think that we did not fully resolve your issue? Call us at **< Appeal Clerk's Phone>** and tell us why you disagree.

Do you have questions about this letter? Call us for free at **< Appeal Clerk's Phone>**.

<Trigger Condition: Untimely Appeal and Untimely Appeal – Redet within 90 days>

Do you have a health, mental health, or learning problem, or a disability? And did that problem make it hard for you to file your appeal on time? Or did something very bad happen to you or a close family member (like a serious illness or death)? If so, tell us in writing why you could not file your appeal on time. If we agree, your appeal may be reopened.

Be sure to keep the originals for your records. Send us a copy.

See the "How to Report Changes or Send Information to TennCare" page at the end of this letter.

<Trigger Condition: Always>

Do you need help with this letter because you have a health problem, learning problem or a disability? Or, do you need help in another language? If so, you have a right to get help and we can help you. See the "Do you need Special Help" page with this letter. Or call **<TennCare Connect>** for free at **<TCC Phone>**.

- **Do you have a mental illness and need help with this letter?**
The **<TennCare Advocacy Program>** can help you.
Call them for free at **<TCAP Phone>**.

We do not allow unfair treatment in our program.

No one is treated in a different way because of race, color, birthplace, religion, language, sex, age, or disability. Do you think you've been treated unfairly? Do you have more questions? Do you need more help? You can make a **free call** to **<TennCare Connect>** at **<TCC Phone>**.

Need special help? Need to report a change? Have questions? Call us.

<TennCare Connect> <TCC Phone>

We're here to help you <StartDT> through <EndDT>, <StartTime> to <EndTime>

3 Notice Details

Below is a table that provides additional details regarding document attributes and data elements for this particular document.

Field Name on Form	Definition	Database Table / Reference Table	Database Column / Reference Table Name	Field Logic
TennCare	Name of the organization sending the letters	<i>RT_ORGANIZATION</i>	<i>Name - TN</i>	This is a table value that identifies the name of the organization sending the letters.
TEDS POBox	PO Box for the TEDS project mailbox.	<i>RT_ORGANIZATION</i>	<i>Address Line 1 - TN</i>	This is a table value that identifies the TEDS P.O. Box. Example format: 305240
TEDS CITY	City for the TEDS project mailbox.	<i>RT_ORGANIZATION</i>	<i>City - TN</i>	This is a table value that identifies the City associated with the TEDS P.O. Box. Example format: NASHVILLE
TEDS STATE	State for the TEDS project mailbox.	<i>RT_ORGANIZATION</i>	<i>State - TN</i>	This is a table value that identifies the State associated with the TEDS P.O. Box. Example format: TENNESSEE (it must not be abbreviated)

Field Name on Form	Definition	Database Table / Reference Table	Database Column / Reference Table Name	Field Logic
TEDS ZIP	Zip code for the TEDS project mailbox.	RT_ORGANIZATION	Zipcode - TN	This is a table value that identifies the zip code associated with the TEDS P.O. Box. Example format: 37230-5240
Month	Letter Date Month	CO_REQUEST_HISTORY RT_MONTH	GENERATE_DT Notice Text	This field will display the month associated with the date the notice was generated plus two business days. The month will be displayed in either English or Spanish depending on the language of the notice template. It will display the full name of the month according to the long date standards defined above.

Field Name on Form	Definition	Database Table / Reference Table	Database Column / Reference Table Name	Field Logic
DD	Letter Date Day	CO_REQUEST_HISTORY	GENERATE_DT	This field will display the day associated with the date the notice was generated plus two business days. The day will follow the long date standards.
YYYY	Letter Date Year	CO_REQUEST_HISTORY	GENERATE_DT	This field will display the year associated with the date the notice was generated plus two business days. The year will follow the long date standards as defined above.
APPELLANT NAME	Name of the Appellant	DC_INDV	FIRST_NAME MID_NAME LAST_NAME SUFX_NAME	This field will be populated with the appellant name. The name will be displayed First Name Middle Initial Last Name Suffix in all capital letters.

Field Name on Form	Definition	Database Table / Reference Table	Database Column / Reference Table Name	Field Logic
APPELLANT ADDR 1	Appellant Address Line 1	AM_ADDRESS	STREET_NAME	This field will be populated with the appellant address line 1. ADDR1 is intended to be used for the facility name if applicable.
APPELLANT ADDR 2	Appellant Address Line 2	AM_ADDRESS	ADDRESS_LINE_2	This field will be populated with the appellant address line. ADDR2 is intended to be used for the suite if present.
APPELLANT CITY	Appellant Address City	AM_ADDRESS	CITY_NAME	This field will be populated with the appellant city.
APPELLANT STATE	Appellant Address State	AM_ADDRESS	STATE_CD	This field will be populated with the appellant state.
APPELLANT ZIP	Appellant Address Zip	AM_ADDRESS	ZIP_CD	This field will be populated with the appellant 9 digit zip code. Example Format: XXXXX-XXXX
Appeal Number	The number used to track the appeal	AM_REQUEST_DETAILS	APL_NUM	This will populate with the number used to track the appeal.

Field Name on Form	Definition	Database Table / Reference Table	Database Column / Reference Table Name	Field Logic
Appellant Name	Name of person appealing	DC_INDV	FIRST_NAME MID_NAME LAST_NAME SUFIX_NAME	This will be populated with the name of the individual who is appealing their decision. The name will be displayed First Name Middle Initial Last Name Suffix in all capital letters.
Age	Age of the individual appealing their decision	DC_INDV	DOB_DT	This will be calculated within the letter. This field is calculated by taking the system date and adding two business days to get the letter date. From there, the birth date is subtracted to calculate the individual's age.
INDV ID	Person ID for the individual up for renewal	DC_INDV	INDV_ID	This is populated with the Person ID for the appellant.
Appeal Received Date	The date the appeal was received by HCFA	AM_REQUEST_D ETAILS	RECVD_DT	This field will be populated with the date that the HCFA received the appeal

Field Name on Form	Definition	Database Table / Reference Table	Database Column / Reference Table Name	Field Logic
Appeal Reason	Reason for appellant's appeal	AM_REQUEST_P ROG_DETAILS	PROGRAM_CD	This field will be populated with a description of the issue up for appeal
LTSS Phone	LTSS Services and Support Number	RT_ORGANIZAT ION	Phone - LTSS	This is a table value that identifies the LTSS Services and Support phone number. Example format: 800-878-3192
SU Phone	Solutions Unit number	RT_ORGANIZAT ION	Phone - SU	This is a table value that identifies the SU phone number. Example format: 800-878-3192
TennCare Connect	Name of the Tennessee Health Connection Organization	RT_ORGANIZAT ION	Name - HC	This is a table value that identifies the Tennessee Health Connection Organization.
TCC Phone	TN Health Connection Phone Number	RT_ORGANIZAT ION	Phone - HC	This is a table value that identifies the TNHC phone number Example format: 855-259-0701

Field Name on Form	Definition	Database Table / Reference Table	Database Column / Reference Table Name	Field Logic
StartDT	Tennessee Health Connection Opening Date for Operations	RT_WEEKDAY	Notice Text (English) - 2 Notice Text (Spanish) - 2	This is a table value that identifies the first week day of operation for TNHC. It will either display in English or Spanish depending on the notice language. Example: Monday
EndDT	Tennessee Health Connection Closing Date for Operations	RT_WEEKDAY	Notice Text (English) - 7 Notice Text (Spanish) - 7	This is a table value that identifies the last week day of operation for TNHC. It will either display in English or Spanish depending on the notice language Example: Saturday
StartTime	Tennessee Health Connection Opening Hours of Operations	RT_ORGANIZATION	Open_Hour - HC	This is a table value that identifies the first hour of operation for TNHC. Example: 7 a.m.

Field Name on Form	Definition	Database Table / Reference Table	Database Column / Reference Table Name	Field Logic
EndTime	Tennessee Health Connection Closing Hours of Operations	RT_ORGANIZATION	Close_Hour - HC	This is a table value that identifies the last hour of operation for TNHC. Example: 7 p.m.
Appeal Clerk's Office	Phone number for the Appeal Clerk's Office	RT_ORGANIZATION	Phone - AU	This is a phone number of the appeals clerk's office. Example: 844-202-5618
Extended Date	The date the appellant has to return the renewal packet by.	ED_ELIGIBILITY	ELIGIBILITY_END_DT	This will be calculated in the letter as 90 calendar days from the individual's eligibility end date. Example Format: March 21, 2017.
App Case Appeal Number	The number used to track the appeal	AM_REQUEST_DETAILS	APL_NUM	This will populate with the number used to track the appeal.
TEDS URL	URL for the TEDS Member Portal	RT_ORGANIZATION	Website - TD	This is a table value that identifies the TEDS Member Portal URL. Example: https://tenncareconnect.gov

Field Name on Form	Definition	Database Table / Reference Table	Database Column / Reference Table Name	Field Logic
TEDS Name	Name of the TEDS Member Portal	RT_ORGANIZATION	Name - TD	This is a table value that identifies the TEDS Member Portal. Example: TennCare Connect
TEDS Fax	Fax number for TEDS	RT_ORGANIZATION	Fax - TN	This is a table value that identifies the TEDS fax number.
Prior Hearing Date	Date when prior hearing was held on same issue	AM_APL_STAT_LOG	PR_HER_DT	This will populate with the date when the prior hearing was held on the same issue. Example: March 29, 2017
TennCare Advocacy Program	Name of the TennCare Advocacy Organization	RT_ORGANIZATION	Name - AP	This is a table value that identifies the TennCare Advocacy Organization.
TCAP Phone	TennCare Advocacy Program number	RT_ORGANIZATION	Phone -AP	This is a table value that identifies the TCAP phone number. Example format: 800-758-1638

4 Spanish Translation



NO_Notices_Appeal_
ResNotice_v0.4 rec 0f

5 Example



NO_Notices_Appeal_
Closing-WithdrawalFo